

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	49007	019100
O.I.P.E. CLASSIFIER		10	9-15-00
FORMALITY REVIEW	CM	71632	10/19/00
RESPONSE FORMALITY REVIEW		71632	11/19/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date	
Final	Original	
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If more than 150 claims or 10 actions
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